Los Angeles County Sheriff's Department

Officer Involved Shooting

Report Date:	Bureau/Station/Facility:	Admin. Invest.?	Hit?
05/22/2017	Compton Station	☐	☑

Incident Information

URN: 015-11699-2847-057	Date: 09-28-15 Time: 1556 hours
City or Station: Compton Station	Nature of Incident: Deputies responded to the location in response to a man with a gun call. When they contacted the suspect, he drew a pistol and began to point it toward the deputies, who shot the suspect.
Location: [redacted] South Atlantic Drive, Compton, Ca.	

Location Type (*check one or more*):
- ☐ Backyard
- ☐ Beach
- ☐ Business
- ☐ Freeway
- ☐ Industrial
- ☐ Park
- ☑ Parking Lot
- ☑ Residence
- ☐ Rural
- ☐ School
- ☐ Street
- Other: ____

Lighting (*check only one*):
- ☐ Darkness
- ☑ Daylight
- ☐ Other
- ☐ Street Lights

Weather (*circle only one*):
- ☑ Clear
- ☐ Cloudy
- ☐ Fog
- ☐ Rain

Distance: 3-5 feet

Total # of Shots Fired by Deputy: 6

Total # of Shots Fired by Suspect: 0

Incident Type (*check one or more*):
- ☐ Accidental
- ☑ Armed Person
- ☐ Fleeing Suspect
- ☐ Foot Pursuit
- ☐ Gun Take Away
- ☐ Moving Vehicle
- ☐ Sniper/Ambush
- ☐ Startle
- ☐ Struggle Involved
- ☐ Traffic Stop
- ☐ Unarmed Person
- ☐ Unintentional
- ☐ Vehicle Pursuit
- ☐ Warrant Service
- ☐ Warning Shot
- Other: ____

Initiated by (*check only one*):
- ☐ Arrest Warrant
- ☑ Call
- ☐ Observation
- ☐ One Person Unit
- ☐ Other
- ☐ Search Warrant
- ☑ Two Person Unit

Prior Activity (*check only one*):
- ☐ Detective
- ☐ Inmate Transport
- ☐ Other
- ☑ Routine Patrol

Aero Unit? ☐ Canine Unit? ☐

Employee Witnesses

Employee #	Last Name	First Name	M.I.	ShiftTime (*check only one*)	ShiftType (*check only one*)
				☐ EM ☐ PM ☐ Day	☐ Regular ☐ Overtime ☐ Off Duty
				☐ EM ☐ PM ☐ Day	☐ Regular ☐ Overtime ☐ Off Duty
				☐ EM ☐ PM ☐ Day	☐ Regular ☐ Overtime ☐ Off Duty

Non-Employee Witnesses

Last Name [redacted]		First Name [redacted]		M.I. [redacted]	
Street Address [redacted]	City [redacted]	Zip Code [redacted]	Work Ph	Home Ph [redacted]	
Last Name [redacted]		First Name [redacted]		M.I. [redacted]	
Street Address [redacted]	City [redacted]	Zip Code [redacted]	Work Ph	Home Ph [redacted]	
Last Name [redacted]		First Name [redacted]		M.I. [redacted]	
Street Address [redacted]	City [redacted]	Zip Code [redacted]	Work Ph [redacted]	Home Ph [redacted]	

Supervisors

Employee #	Last Name	First Name	M.I.	(*check one or more*)
[redacted]	Terry	Clyde	L.	☑ On Duty ☐ Present during shooting ☐ Witness to shooting ☐ Involved in shooting
				☐ On Duty ☐ Present during shooting ☐ Witness to shooting ☐ Involved in shooting

Watch Sergeant

Employee #	Last Name	First Name	M.I.
[redacted]	Berardi	Robert	F.

Watch Commander

Employee #	Last Name	First Name	M.I.
[redacted]	Mitry	Nabeel	S.

PSTD Use Only

SH # 2387545

Rollout Information

Arrival Date	Arrival Time	Date Submitted	Date of Recommendation
09/28/15	1739 hours		

Employee #	Last Name	First Name	M.I.
[redacted]	Flores	David	NMI
[redacted]	Carrasco	Jesus	NMI
[redacted]	Martin	Daniel	W.

Shooting / Force Information

Method

(AW) Arwen
(BC) Baton:(Control)
(BI) Baton:(Impact)
(BF) Bodily Fluids
(CN) Canine
(CR) Carotid Restraint
(CH) Choke Hold
(CT) Control Holds:(Control Techniques)
(TT) Control Holds:(Team Takedown)
(TD) Control Holds:(Takedown)
(CE) Chemical
(OC) Chemical Agents (OC Spray)
(TG) Chemical Agents (Tear Gas)
(EX) Explosives
(FH) Firearm (Handgun)
(FR) Firearm (Rifle)
(FS) Firearm (Shotgun)
(FO) Firearm (Other)
(FB) Flashbang
(FL) Flashlight
(OE) Other Weapon: Edged
(OV) Other Weapon: Vehicle
(OB) Other Weapon: Blunt Object
(OO) Other Weapon: Other
(PK) Personal Weapon: Feet/Leg: (Kick)
(PS) Personal Weapon: Feet/Leg: (Sweep)
(PH) Personal Weapon (Hand/Arm)
(PP) Personal Weapon (Push)
(PO) Personal Weapon (Other)
(RS) Resistance
(CN) Restraint Device (Capture Net)
(RH) Restraint Device (Handcuffs)
(HB) Restraint Device:Hobble (Legs Only)
(TP) Restraint Device:Hobble (TARP)
(RE) Restraint Device: REACT Belt
(SP) Sap
(SH) Shield
(SG) 37mm Stinger
(SB) Sting Ball
(ST) Stun Bag
(TR) Taser
(UC) Uncooperative

Type of Injury

(AB) Abrasion
(BR) Bruise
(BU) Burn
(CP) Complaint of Pain
(CO) Concussion
(DH) Death
(DI) Dislocation
(DB) Dog Bite
(FR) Fractures
(GS) Gunshot
(HB) Human Bite
(LC) Lacerations
(ND) Nerve Damage
(OD) Organ Damage
(PA) Paralysis
(PW) Puncture Wound
(SD) Soft Tissue Damage
(ST) Sprain/Twists
(UN) Unconscious
(RM) Refused Med Treatment
(NN) NONE

Body Part Injured

(AD) Abdomen
(AK) Ankle
(AR) Arm
(BK) Back
(BT) Buttocks
(CH) Chest
(EL) Elbow
(FA) Face
(FE) Feet
(FI) Fingers
(GE) Genitals
(GR) Groin
(HD) Hand
(HE) Head
(HI) Hip
(IN) Internal
(KN) Knees
(LE) Leg
(NK) Neck
(SH) Shoulder
(WR) Wrist

Brand

(AK) AK-47
(BN) Benelli
(BR) Beretta
(BW) Browning
(CH) Charter Arms
(CO) Colt
(DA) Davis Industries
(GL) Glock
(HA) Harrington & Richardson
(HI) Hi Standard
(HK) H & K
(IT) Ithica
(IV) Iver Johnson
(JE) Jennings
(LO) Lorcin
(LU) Luger
(MA) Marlin
(MO) Mossberg
(NC) NCI aka SKS
(NA) North American
(NO) Norinco
(RA) Raven
(RM) Remington
(RG) RG
(RI) RGI
(RO) Rossi
(SW) Smith & Wesson
(SR) Sturm Ruger
(SS) SIG Sauer
(ST) Sterling
(TA) Taurus
(WE) Weatherby
(WN) Winchester
(US) US Government
(YY) Handmade (Inmate)
(XX) Homemade (Non-Inmate)
(ZZ) Other Brand

Caliber

(9) 9 mm
(10) 10 mm
(12) 12 guage
(20) 20 guage
(21) .22-250
(22) .22 caliber
(23) .223 caliber
(24) .243 caliber
(25) .25 caliber
(30) .308 caliber
(35) .357 caliber
(36) 30-60 caliber
(38) .38 caliber
(40) .40 caliber
(41) .410 guage
(44) .44 caliber
(45) .45 caliber
(50) 50 mm
(SL) Slug
(WW) Other caliber

FORCE APPLIED (one code per block)

Used By (E# or S#)	Used Against (E# or S#)	Method (Code)	Brand (Code)	Caliber (Code)	Authorized Weapon? (Y/N)	Authorized Ammunition? (Y/N)	Type of Injury (Code)	Body Part (Code)
S#1	E#1 and E#2	FH	ZZ	9				
E#1	S#1	FH	SW	9	Y	Y	GS	AR AD
E#2	S#1	FH	HK	45	Y	Y		

Officer Involved Shooting
Involved Employee Information

URN: 015-11699-2847-057

Involved Employee

E 1

Employee #: [redacted]	Last Name: Strong	First Name: Dru	M.I.: E.
Sex: M Race: W	Rank: Bonus I	Unit Assignment: Compton Station	Work Assignment (Unit #, Module, etc.): 281E
ShiftTime (*circle only one*): ☐ EM ☑ PM ☐ Day	ShiftType (*circle only one*): ☑ Regular ☐ Overtime ☐ Off Duty	Intoxication/Drug Usage? ☐	Substance Used:
Hospital Admission? ☐	Hospital Name:	Coroner Case? ☐	Coroner Case #: / Interviewed? ☑
Hrs of sleep prior to shooting: 8	Duty Time (hrs): 1300-2300	Clothing (*circle only one*): ☐ Plain Clothes no Vest ☐ Raid Jacket w/ Vest ☐ Plain Clothes w/ Vest ☐ Uniform no Vest ☐ Raid Jacket no Vest ☑ Uniform w/ Vest	Other Factors:
Age: [redacted] Height: 510	Weight: 165		
Range Qualification Date: [redacted]	PPC Qualification Date: [redacted]	Laser Training Date: [redacted]	
Certified with Weapon Used? [redacted]	Patrol Certification? [redacted]	Certification Unit: [redacted] / Prior Shootings? [redacted]	Number of Prior Shootings: [redacted] / Directed Force: [redacted]
Weapons Fired Brand: Smith & Wesson	Caliber: 9mm / # Shots: 3	Weapons Fired Brand:	Caliber: / # Shots:
Field Training Officer Emp #: [redacted]	Last Name: [redacted]	First Name: [redacted]	M.I.: [redacted]
Field Training Officer Emp #: [redacted]	Last Name: [redacted]	First Name: [redacted]	M.I.: [redacted]

E 2

Employee #: [redacted]	Last Name: Goodwin	First Name: Steven	M.I.: J.
Sex: M Race: W	Rank: DSG	Unit Assignment: Compton Station	Work Assignment (Unit #, Module, etc.): 281E
ShiftTime (*circle only one*): ☐ EM ☑ PM ☐ Day	ShiftType (*circle only one*): ☑ Regular ☐ Overtime ☐ Off Duty	Intoxication/Drug Usage? ☐	Substance Used:
Hospital Admission? ☐	Hospital Name:	Coroner Case? ☐	Coroner Case #: / Interviewed? ☑
Hrs of sleep prior to shooting: 6-7	Duty Time (hrs): 1300-2100	Clothing (*circle only one*): ☐ Plain Clothes no Vest ☐ Raid Jacket w/ Vest ☐ Plain Clothes w/ Vest ☐ Uniform no Vest ☐ Raid Jacket no Vest ☑ Uniform w/ Vest	Other Factors:
Age: [redacted] Height: 605	Weight: 330		
Range Qualification Date: 03/16/15	PPC Qualification Date: 06/24/15	Laser Training Date:	
Certified with Weapon Used? [redacted]	Patrol Certification? [redacted]	Certification Unit: [redacted] / Prior Shootings? [redacted]	Number of Prior Shootings: [redacted] / Directed Force: [redacted]
Weapons Fired Brand: Heckler & Koch	Caliber: .45 / # Shots: 3	Weapons Fired Brand:	Caliber: / # Shots:
Field Training Officer Emp #: [redacted]	Last Name: [redacted]	First Name: [redacted]	M.I.: [redacted]
Field Training Officer Emp #: [redacted]	Last Name: [redacted]	First Name: [redacted]	M.I.: [redacted]

E

Employee #:	Last Name:	First Name:	M.I.:
Sex: Race:	Rank:	Unit Assignment:	Work Assignment (Unit #, Module, etc.):
ShiftTime (*circle only one*): ☐ EM ☐ PM ☐ Day	ShiftType (*circle only one*): ☐ Regular ☐ Overtime ☐ Off Duty	Intoxication/Drug Usage? ☐	Substance Used:
Hospital Admission? ☐	Hospital Name:	Coroner Case? ☐	Coroner Case #: / Interviewed? ☐
Hrs of sleep prior to shooting:	Duty Time (hrs):	Clothing (*circle only one*): ☐ Plain Clothes no Vest ☐ Raid Jacket w/ Vest ☐ Plain Clothes w/ Vest ☐ Uniform no Vest ☐ Raid Jacket no Vest ☐ Uniform w/ Vest	Other Factors:
Age: Height:	Weight:		
Range Qualification Date:	PPC Qualification Date:	Laser Training Date:	
Certified with Weapon Used? ☐	Patrol Certification? ☐	Certification Unit: / Prior Shootings? ☐	Number of Prior Shootings: / Directed Force: ☐
Weapons Fired Brand:	Caliber: / # Shots:	Weapons Fired Brand:	Caliber: / # Shots:
Field Training Officer Emp #:	Last Name:	First Name:	M.I.:
Field Training Officer Emp #:	Last Name:	First Name:	M.I.:

See Other Side

Officer Involved Shooting
Suspect Information

URN: 015-11699-2847-057

Suspect Information

S 1

Last Name: Cantor	First Name: Aurelio	M.I.: NMI
AKA Last Name:	First Name:	M.I.:

Sex: M Race: H	Street Address: [redacted]	City: [redacted]	State & Zip Code: [redacted]
Work Phone: [redacted]	Home Phone: [redacted]	Social Security #: [redacted]	Driver's License #: [redacted]
Age: 38 D.O.B. 09/19/78	Height: 507 Weight: 190	FBI #: [redacted]	CII #: [redacted]
Booking #: 4466578	Primary Charge: 245(D)(1) PC	Secondary Charge:	
Coroner Case? ☐	Coroner Case #:	Intoxication/Drug Usage? ☑	Substance Used: Alcohol, marijuana, meth.
Armed? ☑	Apprehended? ☑	Mental Illness? ☐	Criminal History? [redacted]

Vehicle Make	Model:	Year:	Parole:	Probation:	Prior Felony Conviction:
Infinity	G35	2003			[redacted]

S

Last Name:	First Name:	M.I.:
AKA Last Name:	First Name:	M.I.:

Sex: Race:	Street Address:	City:	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:	Driver's License #:
Age: D.O.B.	Height: Weight:	FBI #:	CII #:
Booking #:	Primary Charge:	Secondary Charge:	
Coroner Case? ☐	Coroner Case #:	Intoxication/Drug Usage? ☐	Substance Used:
Armed? ☐	Apprehended? ☐	Mental Illness? ☐	Criminal History? ☐

Vehicle Make	Model:	Year:	Parole:	Probation:	Prior Felony Conviction:

S

Last Name:	First Name:	M.I.:
AKA Last Name:	First Name:	M.I.:

Sex: Race:	Street Address:	City:	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:	Driver's License #:
Age: D.O.B.	Height: Weight:	FBI #:	CII #:
Booking #:	Primary Charge:	Secondary Charge:	
Coroner Case? ☐	Coroner Case #:	Intoxication/Drug Usage? ☐	Substance Used:
Armed? ☐	Apprehended? ☐	Mental Illness? ☐	Criminal History? ☐

Vehicle Make	Model:	Year:	Parole:	Probation:	Prior Felony Conviction:

S

Last Name:	First Name:	M.I.:
AKA Last Name:	First Name:	M.I.:

Sex: Race:	Street Address:	City:	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:	Driver's License #:
Age: D.O.B.	Height: Weight:	FBI #:	CII #:
Booking #:	Primary Charge:	Secondary Charge:	
Coroner Case? ☐	Coroner Case #:	Intoxication/Drug Usage? ☐	Substance Used:
Armed? ☐	Apprehended? ☐	Mental Illness? ☐	Criminal History? ☐

Vehicle Make	Model:	Year:	Parole:	Probation:	Prior Felony Conviction:

See Other Side

SUPPLEMENTAL NON-EMPLOYEE WITNESSES
Los Angeles County Sheriff's Department

Non-Employee Witnesses

Last Name	First Name	M.I.	Street Address	Zip Code	Work Ph	Home Ph
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]		[redacted]
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]